#### PERMITTEE NAME/ADDRESS(INCLUDE FACILITY NAME/LOCATION IF DIFFERENT)

NAME ADDRESS

Dominion - Possum Point Power Station

5000 Dominion Blvd

Glen Allen

23060

**FACILITY** 

LOCATION 19000 Possum Point Rd

### **COMMONWEALTH OF VIRGINIA DEPARTMENT OF ENVIRONMENTAL QUALITY**

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM(NPDES) **DISCHARGE MONITORING REPORT(DMR)** 

				_							
	VA	00020	71		010						
	PERM	AUN TIN	/BER	][	DISCHAR	GE NU	MBER				
			MONI	TOR	TORING PERIOD						
	YEAR	МО	DAY		YEAR	МО	DAY				
FROM				то							

Industrial Major

02/02/2016

#### **DEPT. OF ENVIRONMENTAL QUALITY** (REGIONAL OFFICE)

Northern Regional Office 13901 Crown Court

Woodbridge

VA 22193

NOTE: READ PERMIT AND GENERAL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

PARAMETER		QUANT	TTY OR LOADING			QUALITY OR CO	NCENTRATION		NO.	FREQUENCY OF	SAIVII LL
7,00,000		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX.	ANALYSIS	TYPE
001 FLOW	REPORTD	0.017		MGD	*****	*****	*****				
	REQRMNT	NL	NL	MGD	*****	*****	*****		0	1/M	EST
002 pH (1)	REPORTD	*****	******		*****	6.14		su			
	REQRMNT	******	*****		6.0	*****	9.0	SU	0	1/M	GRAB
004 TSS	REPORTD	*****	*****		*****	<1.0		MG/L			
	REQRMNT	******	*****		******	30	100	MG/L	0	1/M	4HC
090 MOLYBDENUM, TOTAL (AS	REPORTD	******	*****		*****	<50.0		UG/L			
	REQRMNT	*****	*****		*****	NL	NL	UG/L	0	1/M	4HC
137 HARDNESS, TOTAL (AS	REPORTD	******	*****		******	88.3		MG/L			
CACO3)	REQRMNT	*****	*****		******	NL	NL	MG/L	0	1/M	4HC
145 CHLORIDES	REPORTD	*****	*****		*****	57,600		UG/L			
	REQRMNT	*****	*****		*****	340000	340000	UG/L	0	1/M	4HC
185 NICKEL, TOTAL	REPORTD	*****	*****		*****	9.47		UG/L			
ECOVERABLE	REQRMNT	****	******		******	19	19	UG/L	0	1/M	4HC
ECOVERABLE	REPORTD	******	*****		*****	<0.0750		UG/L			
	REQRMNT	*****	*****		*****	1.5	1.5	UG/L	0	1/M	4HC

ADDITIONAL PERMIT REQUIREMENTS OR COMMENTS (1) Ph value measured in the field.

- (2) Values preceded by "<" represent results not detected at the
- (3) Values with suffix +/- represent results with an estimated value between the Method Detection Limit (MDL) and the Practical Quantitation Limit (PQL) for analyte.
- (4) NA = Not Applicable

Reporting Dete	ction Limit (RDL) a	nd listed as < RDL.	(5) NR =	Not Reported			-		
BYPASSES AND	TOTAL OCCURRENCES	TOTAL FLOW(M.G.)	TOTAL BOD5(K.G.)	-OPERATO	DATE				
OVERFLOWS					2.2		145.5		DAY
THE SHARMS AND A REAL PROPERTY OF		THIS DOCUMENT AND AL		Brian Bulloch	SIGNATURE	CERTIFICATE NO.	YEAR Colb	MO.	05
	= = = = = = = = = = = = = = = = = = = =	RSONNEL PROPERLY GAT MY INQUIRY OF THE PE		PRINCIPAL EXECUTIVE OFFI	CER OR AUTHORIZED AGENT	TELEPHONE			
		NS DIRECTLY RESPONSI MITTED IS TO THE BES	The same of the sa						
10.1000 12.1000 12.1000 12.1000 12.1000 12.1000 12.1000 12.1000 12.1000 12.1000 12.1000 12.1000 12.1000 12.1000		TE, I AM AWARE THAT FALSE INFORMATION,		TYPED OR PRINTED NAME	SIGNATURE		YEAR	MO.	DAY
POSSIBILITY OF FI	NE AND IMPRISONMENT	FOR KNOWING VIOLATI	ONS.						

# PERMITTEE NAME/ADDRESS(INCLUDE FACILITY NAME/LOCATION IF DIFFERENT)

FACILITY NAME/LOCATION IF DIFFERENT

NAME ADDRESS

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Glen Allen

VA 23060

FACILITY LOCATION 19000 Possum Point Rd

# COMMONWEALTH OF VIRGINIA DEPARTMENT OF ENVIRONMENTAL QUALITY

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM(NPDES)
DISCHARGE MONITORING REPORT(DMR)

	VA	00020	71	Jſ	010				
	PERM	IIT NUN	/BER		DISCHARGE NUMBE				
			MONI	TOR	ING PERIO	DD D			
	YEAR	МО	DAY		YEAR	МО	DAY		
ROM				то					

Industrial Major

02/02/2016

# DEPT. OF ENVIRONMENTAL QUALITY (REGIONAL OFFICE)

Northern Regional Office 13901 Crown Court

Woodbridge

VA 22193

NOTE: READ PERMIT AND GENERAL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

PARAMETER		QUANT	TITY OR LOADING			QUALITY OR CO	NCENTRATION		NO.	FREQUENCY OF	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX.	ANALYSIS	ITPE
193 THALLIUM, TOTAL (AS	REPORTD	******	*****		*****	<0.300		UG/L			
ΓL)	REQRMNT	*****	*****		******	0.47	0.47	UG/L	0	1/M	4HC
196 ZINC, TOTAL	REPORTD	******	*****		*****	35.2		UG/L			
RECOVERABLE	REQRMNT	*****	******		******	77	77	UG/L	0	1/M	4HC
202 CADMIUM, TOTAL	REPORTD	******	*****		******	<0.300		UG/L			
RECOVERABLE	REQRMNT	*****	*****		******	1.1	1.1	UG/L	0	1/M	4HC
203 COPPER, TOTAL RECOVERABLE	REPORTD	*****	******		*****	14.1		UG/L			
	REQRMNT	******	*****		******	8.4	8.4	UG/L	0	1/M	4HC
212 ARSENIC, TOTAL	REPORTD	*****	******		******	<0.300		UG/L			
RECOVERABLE	REQRMNT	****	******		******	220	220	UG/L	0	1/M	4HC
233 LEAD, TOTAL	REPORTD	*****	*****		******	<0.300		UG/L			
RECOVERABLE	REQRMNT	*****	*****		******	11	11	UG/L	0	1/M	4HC
235 MERCURY, TOTAL	REPORTD	*****	*****		*****	0.00945		UG/L			
RECOVERABLE	REQRMNT	*****	*****		*****	1.1	1.1	UG/L	0	1/M	4HC
37 COBALT, TOTAL (AS CO)	REPORTD	*****	******		*****	7.6		UG/L			
	REQRMNT	******	*****		*******	NL	NL	UG/L	0	1/M	4HC

#### ADDITIONAL PERMIT REQUIREMENTS OR COMMENTS

(1) Ph value measured in the field.

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(2) Values preceded by "<" represent results not detected at the

(4) NA = Not Applicable

BYPASSES AND	TOTAL OCCURRENCES	TOTAL FLOW(M.G.)	TOTAL BOD5(K.G.)	-OPERATO					
		THIS DOCUMENT AND AL		TYPED OR PRINTED NAME	SIGNATURE	CERTIFICATE NO.	YEAR ZOLO	MO.	DAY
THE INFORMATION S	PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED, BASED ON MY INQUIRY OF THE PERSON OR PERSONS NHO MANAGE THE SYSTEM OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION. THE INFORMATION SUBMITTED IS TO THE BEST OF MY KNOWLEDGE			PRINCIPAL EXECUTIVE OFFI	TELEPHONE				
AND BELIEF TRUE, SIGNIFICANT PENAL	ACCURATE AND COMPLE TIES FOR SUBMITTING	TE. I AM AWARE THAT FALSE INFORMATION, FOR KNOWING VIOLATION	THERE ARE INCLUDING THE	TYPED OR PRINTED NAME	SIGNATURE		YEAR	MO.	DAY

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Glen Allen

VA 23060

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## **COMMONWEALTH OF VIRGINIA DEPARTMENT OF ENVIRONMENTAL QUALITY**

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM(NPDES) **DISCHARGE MONITORING REPORT(DMR)** 

	VA	00020	71	] [	010				
	PERM	AUN TIN	/BER	][	DISCHARGE NUMBE				
			MONI	TORI	NG PERIO	OD			
	YEAR	МО	DAY		YEAR	МО	DAY		
ROM				то					

Industrial Major

02/02/2016

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Northern Regional Office 13901 Crown Court

Woodbridge

VA 22193

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PARAMETER		QUANT	TITY OR LOADING			QUALITY OR CO	NCENTRATION		NO.	FREQUENCY	SAMPLE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX.	ANALYSIS	TYPE
314 CHROMIUM, HEXAVALENT	REPORTD	*****	******		*****	<3		UG/L			
TOTAL RECOVERABLE	REQRMNT	*****	*****		*****	16	16	UG/L	0	1/M	4HC
361 IRON, TOTAL	REPORTD	*****	******		******	2,150		UG/L			
RECOVERABLE	REQRMNT	*****	*****		*****	NL	NL	UG/L	0	1/M	4HC
372 BORON, TOTAL	REPORTD	*****	*****		******	604		UG/L			
	REQRMNT	*****	*****		*****	NL	NL	UG/L	0	1/M	4HC
408 SELENIUM, TOTAL RECOVERABLE	REPORTD	*****	******		******	0.693±		UG/L			
	REQRMNT	*****	*****		*****	7.3	7.3	UG/L	0	1/M	4HC
409 VANADIUM, TOTAL	REPORTD	*****	******		*****	<2.0		UG/L			
RECOVERABLE	REQRMNT	*****	*****		******	NL	NL	UG/L	0	1/M	4HC
410 ALUMINUM, TOTAL	REPORTD	*****	******		******	113		UG/L			
RECOVERABLE	REQRMNT	*****	*****		******	NL	NL	UG/L	0	1/M	4HC
49 BARIUM, TOTAL	REPORTD	******	*****		*****	39.2		UG/L	İ		
ECOVERABLE	REQRMNT	******	******		*****	NL	NL	UG/L	0	1/M	4HC
00 OIL & GREASE	REPORTD	*****	*****		*****	<5.0		MG/L			
and the second s	REQRMNT	*******	******		******	15	20	MG/L	0	1/M	4HC

ADDITIONAL PERMIT REQUIREMENTS OR COMMENTS

- (1) Ph value measured in the field.
- (2) Values preceded by "<" represent results not detected at the
- (3) Values with suffix +/- represent results with an estimated value between the Method Detection Limit (MDL) and the Practical Quantitation Limit (PQL) for analyte.
- (4) NA = Not Applicable

BYPASSES AND	TOTAL OCCURRENCES	TOTAL FLOW(M.G.)	TOTAL BOD5(K.G.)	-OPERATOI	DATE				
PREPARED UNDER MY DESIGNED TO ASSUR	DIRECTION OR SUPER E THAT QUALIFIED PE	THIS DOCUMENT AND AL VISION IN ACCORDANCE RSONNEL PROPERLY GATI	WITH A SYSTEM HER AND EVALUATE	TYPED OR PRINTED NAME Brian Bullock PRINCIPAL EXECUTIVE OFFICE	SIGNATURE SER OR AUTHORIZED AGENT	CERTIFICATE NO. TELEPHONE	YEAR Zel 6	MO. 0 Z	DAY
WHO MANAGE THE SY. THE INFORMATION, ' AND BELIEF TRUE, . SIGNIFICANT PENAL	STEM OR THOSE PERSO. THE INFORMATION SUB ACCURATE AND COMPLE TIES FOR SUBMITTING	MY INQUIRY OF THE PER NS DIRECTLY RESPONSI MITTED IS TO THE BES' TE, I AM AWARE THAT' FALSE INFORMATION, FOR KNOWING VIOLATION	BLE FOR GATHERING T OF MY KNOWLEDGE THERE ARE INCLUDING THE	TYPED OR PRINTED NAME	SIGNATURE		YEAR	MO.	DAY

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM(NPDES) **DISCHARGE MONITORING REPORT(DMR)** 

	VA	00020	71		010					
	PERM	AUN TIN	/BER		DISCHARGE NUMBER					
			MONI	TORII	NG PERIO	OD				
	YEAR	МО	DAY		YEAR	мо	DAY			
FROM				то						

Industrial Major

02/02/2016

#### **DEPT. OF ENVIRONMENTAL QUALITY** (REGIONAL OFFICE)

Northern Regional Office 13901 Crown Court

Woodbridge

VA 22193

NOTE: READ PERMIT AND GENERAL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

PARAMETER		QUANT	TTY OR LOADING			QUALITY OR CO	NCENTRATION		NO.	FREQUENCY	SAMPLI
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	EX.	ANALYSIS	TYPE
704 NOAEC - ACUTE 48 HR	REPORTD	*****	*****		NR	*****	*******				
STAT CERIODAPHNIA DUBIA	REQRMNT	*****	*****		100	*****	*****	ola .	0	1/M	24HC
705 NOAEC - ACUTE 48 HR	REPORTD	******	*****		NR	*****	******		Ī		
STAT PIMEPHALES PROMELAS	REQRMNT	*****	*****		100	****	*****	96	0	1/M	24HC
720 TUC - CHRONIC 3-BROOD	REPORTD	*****	******		*****	*****	NR				
TATRE CERIODAPHNIA DUBIA	REQRMNT	******	******		******	*****	1.44	TU-C	0	1/M	24HC
721 TUC - CHRONIC 7-DAY STATRE PIMEPHALES PROMELAS	REPORTD	******	*****		******	*****	NR		Ī		
	REQRMNT	*****	*****		*****	****	1.44	TU-C	0	1/M	24HC
796 BERYLLIUM, TOTAL	REPORTD	*****	*****		*****	<2.0		UG/L			
RECOVERABLE (AS BE)	REQRMNT	*****	*****		******	NL	NL	UG/L	0	1/M	4HC
797 ANTIMONY, TOTAL	REPORTD	******	******		*****	<0.300		UG/L	Î		Ī
RECOVERABLE (AS SB)	REQRMNT	*****	*****		******	640	640	UG/L	0	1/M	4HC
337 SPECIFIC CONDUCTANCE	REPORTD	******	*****		*****	376		UM/CM			
	REQRMNT	******	*****		*****	*****	NL	UM/CM	0	1/M	4HC
39 CHROMIUM, TRIVALENT	REPORTD	******	******		******	<5		UG/L			
TOAL RECOVERABLE	REQRMNT	*****	*****		*****	73	73	UG/L	0	1/M	4HC

ADDITIONAL PERMIT REQUIREMENTS OR COMMENTS (1) Ph value measured in the field.

**BYPASSES** 

AND

- Quantitation Limit (PQL) for analyte. (4) NA = Not Applicable
- (2) Values preceded by "<" represent results not detected at the Reporting Detection Limit (RDL) and listed as < RDL.

TOTAL

**OCCURRENCES** 

(5) NR = Not Reported

71110			
OVERFLOWS			
I CERTIFY UNDER P	ENALTY OF LAW THAT	THIS DOCUMENT AND AL	L ATTACHMENTS WERE
PREPARED UNDER MY	DIRECTION OR SUPERV	VISION IN ACCORDANCE	WITH A SYSTEM
DESIGNED TO ASSUR	E THAT QUALIFIED PER	RSONNEL PROPERLY GATE	HER AND EVALUATE
THE INFORMATION S	UBMITTED. BASED ON N	MY INQUIRY OF THE PER	RSON OR PERSONS
WHO MANAGE THE SY	STEM OR THOSE PERSON	NS DIRECTLY RESPONSI	BLE FOR GATHERING
THE INFORMATION, '	THE INFORMATION SUBM	MITTED IS TO THE BEST	r of my knowledge
AND BELIEF TRUE,	ACCURATE AND COMPLET	IE. I AM AWARE THAT	THERE ARE
SIGNIFICANT PENAL	TIES FOR SUBMITTING	FALSE INFORMATION,	INCLUDING THE
POSSIBILITY OF FIR	NE AND IMPRISONMENT	FOR KNOWING VIOLATIO	ONS

TOTAL FLOW(M.G.) TOTAL BOD5(K.G.)	OPERATOR IN RESPONSIBLE CHARGE SAMPLER			DATE		
THIS DOCUMENT AND ALL ATTACHMENTS WERE RVISION IN ACCORDANCE WITH A SYSTEM	TYPED OR PRINTED NAME Brian Bulloch	SIGNATURE	CERTIFICATE NO.	YEAR	MO.	DAY
DESONNEL PROPERLY GATHER AND EVALUATE MY INQUIRY OF THE PERSON OR PERSONS NOS DIRECTLY RESPONSIBLE FOR GATHERING MITTED IS TO THE BEST OF MY KNOWLEDGE	PRINCIPAL EXECUTIVE OFF	FICER OR AUTHORIZED AGENT	TELEPHONE			
ETE, I AM AWARE THAT THERE ARE G FALSE INFORMATION, INCLUDING THE I FOR KNOWING VIOLATIONS.	TYPED OR PRINTED NAME	SIGNATURE		YEAR	MO.	DAY